



INSURANCE REQUIREMENTS AND VERIFICATION OF COMPLIANCE

As soon as you begin to plan your event, review your insurance policy exclusions and provide the city's insurance requirements to your broker to determine whether there is coverage for all activities planned **and** insurance documents can be provided to meet the city's requirements (common policy exclusions are shown on page 3 of this document). This will help to avoid the most common reasons insurance is not accepted: errors and omissions.

Insurance requirements depend on the risk level of the event. As a general rule, the City of Carlsbad requires a minimum of one million dollars in liability coverage. Events with higher risk levels require additional insurance coverage in the form of higher limits and/or multiple policies if all activities cannot be covered by one policy. Contact the Risk Manager at 760-602-2470 for any questions about the required amount of coverage.

Before final permit approval, you will need to submit a certificate(s) and endorsement(s) for your Commercial General Liability (CGL) Insurance policy that name as Additional Insured, the City of Carlsbad, its officers, employees, volunteers and agents. Other agencies related to the city may have to be named as well, depending on the event. An example is the Carlsbad Redevelopment Agency. You may also be required to submit insurance for other public entities (e.g. County, State, NCTD, Caltrans, etc.) impacted by your event. Insurance coverage must be primary, and maintained for the duration of the event including set-up and dismantle dates.

If the required insurance for the event is provided from any entity other than the Applicant, that entity must also appear as a Co-Applicant and provide the same signatures as set forth above.

THE FOLLOWING INSURANCE DOCUMENTS MUST BE SUBMITTED:

Certificate(s) of Insurance

Complete the checklist for each policy required for the event (sample certificate on page 5 of this document). This document is a statement of the coverage in place but does not extend coverage or any other rights to the city or any other party.

Endorsement to the Policy

Complete the checklist. This document adds language to the insurance policy that is required by the permit. An example is the requirement to make the city additional insured on the insured's policy.

A model endorsement form and samples of insurance industry standard endorsement forms that are acceptable, as long as they have not been altered with additional wording to limit/restrict coverage, are found on pages 6, 7, and 8 of this document.

NOTE: Excerpts from policies are not accepted in lieu of the required endorsement.



SPECIAL EVENT INSURANCE CHECKLIST

This checklist as follows and the attached sample certificate are to be used as a guide. Some insurers use their own forms that may not match the sample exactly.

- ☐ **(1) INSURED:** The “insured” matches the Applicant’s name as it appears in the application.

The Applicant is the party responsible for the event. Insurance from an entity other than the event holder is **not** a substitute for coverage for the event. Examples include party planners, caterers, or other vendors who provide event services but may not be responsible for the entire event. Insurance from a vendor(s) who is not the Applicant may be required and provided **in addition to** the insurance for the event.

- ☐ **(2) GENERAL LIABILITY:** “Occurrence” box is checked.

Additional policies or confirmation of coverage in this policy are required for activities that are commonly excluded from the typical Commercial General Liability policy. An example is Liquor Liability coverage, which generally, is provided by a separate policy and will only cover insureds ‘in the business of’ manufacturing, selling, distributing, serving alcoholic beverages for charge or no charge if a license is required for the activity.

If liquor, beer, or wine is available for consumption and money changes hands in any way, shape or form, between the event holder and those who participate/attend, (i.e., for a donation, for a ticket, for a meal, for entry to the event, for the beverage), then Liquor Liability insurance is required. Otherwise, host liquor liability insurance may be provided and shown here.

- ☐ **(2a) LIMITS:** Per occurrence limit is as high as or higher than required.
- \$1 million per occurrence general liability coverage **OR**
 - \$2 million per occurrence general liability coverage if alcohol is to be served

Liquor Liability coverage must be included on the certificate at the same coverage limit even if provided in another policy. This requirement may be met with a combination of primary and excess liability if both policies include liquor liability coverage. Higher limits may be required depending on the risk level of the event.

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☐ ☐ Copy of Liquor Liability insurance attached

- ☐ **(3) POLICY EFFECTIVE AND EXPIRATION DATES:** Policy is current and date(s) of the event fall within the “policy effective” and “policy expiration” dates.

- ☐ **(4) EXCESS/UMBRELLA:** Supplements limits of other policies to meet required limits.

- ☐ **(5) OTHER:** Liquor Liability or other coverage required for the permit is shown here, or along with another policy as appropriate. Limits are as high as or higher than required.

- ☐ **(6) DESCRIPTION OF OPERATIONS:** The name of the event, date(s) to be held, and all activities in the special event application are shown here. **There is no language here attempting to limit liability.**

If it is unclear that there is coverage for any activity, or any event activities are common exclusions to general liability coverage, such as athletic participants, it must be shown that the coverage is provided as discussed below.

Additional policies or confirmation of coverage in any one policy submitted are generally required for activities that are:

- (1) commonly excluded from the typical Commercial General Liability policy
- (2) typically outside the scope of coverage for a policy for one specific activity, such as a single sport

Two of the most common exclusions that applicants are unaware of are liquor liability and athletic participants. As an example, addressing athletic participant coverage is shown below. Following is a list of many types of events and activities that are typically excluded from Commercial General Liability insurance policies.

EXCLUSIONS TO GENERAL LIABILITY POLICIES (SPECIAL ASPECTS)

Some events and activities that may be **EXCLUDED** from many general liability insurance policies are shown below. This is not an exhaustive list and some policies may provide coverage where others do not. Event holders should check their policy to ensure coverage for all activities proposed and evidence of this coverage must be provided.

- Aircraft/aviation, all terrain boarding, animals or animal acts, athletic activities/participants, athletic equipment--sale/manufacture or distribution
- Ballooning, hot air balloons, or balloon rides, base jumping, bicycle or unicycle activities, boating, power boats, power boat racing, bouldering, boxing, bungee jumping
- Canoeing, carnival rides, cheerleading pyramids, chemicals, use or demonstration, circus acts, circuses, climbing wall, concert or dance with mosh pits, concerts over six hours, construction or demolition work
- Demolition work, diving, platform diving or spring board diving
- Equestrian related sports
- Fire (use or demonstration with), fireworks, football (except passing camps w/ no contact drills)
- Gliders, guns (use or demonstration with), gymnastics
- Hang gliding, hockey, horseback riding or use of horses, hot air balloons
- Ice hockey, inflatables, inflatable activities
- Jousting
- Karate or contact martial arts, kayaking
- Lacrosse, luge
- Mechanical amusement rides or services, medical or chiropractic care, motorized sporting equipment, mountain biking, mountain climbing, mountain boarding
- Parachuting, polo, professional sporting activities, games, racing or contests of a professional nature and with cash prize, pyrotechnics, fireworks, explosives, black powder
- Rafting, rap, heavy metal or rock concerts, raves, rock climbing, rodeo or roping events (including practice), roller blade or roller skate activities, roller hockey, ropes courses, rugby
- Saddle animal exposure, scaffolding or elevated platform more than four feet above level, scuba diving, security, skate board activities, skin diving, sky diving, snowboarding, snow skiing, squash
- Tanning devices, tobogganing, tournaments, tractor or truck pulls, traffic control, trampoline
- Water polo, water skiing, watercraft activities or use, waterslides, wrestling

ATHLETIC PARTICIPANTS

If there are athletic participants, one of the following is required:

- "Participant legal liability" coverage is shown on the certificate at the required limit of coverage, or
- "General liability insurance covers liability claims filed by athletic participants for injuries" appears in the description section of the certificate, or
- "Liability claims for injuries filed by athletic participants are not excluded under the general liability insurance coverage" appears in the description section of the certificate.

Note: The medical expense portion of a General Liability policy and/or Workers' Compensation insurance are not accepted in lieu of the above.

☐ Copy of blank waivers and releases of liability forms for athletic participants attached (release of the City of Carlsbad from liability must be included on the form)

☐ Copies of waivers and releases of liability forms signed by all athletic participants (for city events)

☐ **(7) CERTIFICATE HOLDER:** City of Carlsbad, 2560 Orion Way, Carlsbad, CA, 92010

ENDORSEMENT CHECKLIST

The endorsement(s), a separate document(s), must include the following:

☐ The City of Carlsbad, its officers, employees, volunteers and agents are named as additional insured. Related agencies such as the Carlsbad Redevelopment Agency may be required as appropriate. **NO RESTRICTIVE WORDING** is acceptable, other than to restrict the coverage to liability arising out of the operations of the insured.

☐ This policy will not be canceled, materially changed nor the amount of coverage reduced until ten (10) days after receipt of written notice of cancellation or reduction in coverage by the Special Event Coordinator of the City of Carlsbad.

| | | | | | | | |
|---|-------|---|---------------|--|-----------------------------------|---|--------|
| ACORD™ CERTIFICATE OF LIABILITY INSURANCE | | Clear | Save | DATE (MM/DD/YYYY) | | | |
| PRODUCER | | THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. | | | | | |
| | | INSURERS AFFORDING COVERAGE | | NAIC # | | | |
| INSURED | | INSURER A: | | | | | |
| 1 | | INSURER B: | | | | | |
| | | INSURER C: | | | | | |
| | | INSURER D: | | | | | |
| | | INSURER E: | | | | | |
| COVERAGES | | | | | | | |
| THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS. | | | | | | | |
| INSR | ADD'L | TYPE OF INSURANCE | POLICY NUMBER | POLICY EFFECTIVE DATE (MM/DD/YY) | POLICY EXPIRATION DATE (MM/DD/YY) | LIMITS | |
| LTR | INSRD | | | | | | |
| | | GENERAL LIABILITY 2 | | 3 | | EACH OCCURRENCE 2a | \$ |
| | | <input type="checkbox"/> COMMERCIAL GENERAL LIABILITY | | | | DAMAGE TO RENTED PREMISES (Ea occurrence) | \$ |
| | | <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> OCCUR | | | | MED EXP (Any one person) | \$ |
| | | | | | | PERSONAL & ADV INJURY | \$ |
| | | | | | | GENERAL AGGREGATE | \$ |
| | | GEN'L AGGREGATE LIMIT APPLIES PER: | | | | PRODUCTS - COMP/OP AGG | \$ |
| | | <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC | | | | | |
| | | AUTOMOBILE LIABILITY | | | | COMBINED SINGLE LIMIT (Ea accident) | \$ |
| | | <input type="checkbox"/> ANY AUTO | | | | BODILY INJURY (Per person) | \$ |
| | | <input type="checkbox"/> ALL OWNED AUTOS | | | | BODILY INJURY (Per accident) | \$ |
| | | <input type="checkbox"/> SCHEDULED AUTOS | | | | PROPERTY DAMAGE (Per accident) | \$ |
| | | <input type="checkbox"/> HIRED AUTOS | | | | | |
| | | <input type="checkbox"/> NON-OWNED AUTOS | | | | | |
| | | | | | | | |
| | | GARAGE LIABILITY | | | | AUTO ONLY - EA ACCIDENT | \$ |
| | | <input type="checkbox"/> ANY AUTO | | | | OTHER THAN EA ACC | \$ |
| | | | | | | AUTO ONLY: AGG | \$ |
| | | EXCESS/UMBRELLA LIABILITY | | | | EACH OCCURRENCE | \$ |
| | | <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE | | | | AGGREGATE | \$ |
| | | | | | | | \$ |
| | | DEDUCTIBLE 4 | | | | | \$ |
| | | RETENTION \$ | | | | | \$ |
| | | WORKERS COMPENSATION AND EMPLOYERS' LIABILITY | | | | WC STATUTORY LIMITS | OTH-ER |
| | | ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? | | | | E.L. EACH ACCIDENT | \$ |
| | | If yes, describe under SPECIAL PROVISIONS below | | | | E.L. DISEASE - EA EMPLOYEE | \$ |
| | | OTHER 5 | | | | E.L. DISEASE - POLICY LIMIT | \$ |
| DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS 6 | | | | | | | |
| | | | | | | | |
| CERTIFICATE HOLDER | | | | CANCELLATION | | | |
| 7 | | | | SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL _____ DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES. | | | |
| | | | | AUTHORIZED REPRESENTATIVE | | | |

CHECKLIST

MODEL ENDORSEMENT

☐ Policy No. must match Certificate.



POLICY NUMBER: XXXXXXXX COMMERCIAL GENERAL LIABILITY

☐ Insured's Name, if shown, must match certificate.



INSURED: XXXXX XXXX XXXXXXXX

THIS ENDORSEMENT CHANGES THE POLICY.
PLEASE READ IT CAREFULLY.

ADDITIONAL INSURED-
DESIGNATED PERSON OR ORGANIZATION

This endorsement modifies insurance provided under the following:
COMMERCIAL GENERAL LIABILITY COVERAGE PART.

SCHEDULE

☐ Name of Person or Organization: City of Carlsbad, its officers, employees, volunteers and agents



Name of Person or Organization: **City of Carlsbad, its officers, employees, volunteers, and agents.**

(If no entry appears above, information required to complete this endorsement will be shown in the Declarations as applicable to this endorsement.)

☐ Language is not restrictive. For example, "...with respect to liability... caused in whole or in part by..." will not be accepted.



WHO IS AN INSURED (Section II) is amended to include as an insured the person or organization shown in the Schedule as an insured but only with respect to liability arising out of your operations or premises owned by or rented to you.

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City of Carlsbad, Risk Management Department

POLICY NUMBER:

COMMERCIAL GENERAL LIABILITY

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

**ADDITIONAL INSURED – OWNERS, LESSEES OR
CONTRACTORS – (FORM B)**

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART.

SCHEDULE

Name of Person or Organization:

(If no entry appears above, information required to complete this endorsement will be shown in the Declarations as applicable to this endorsement.)

WHO IS AN INSURED (Section II) is amended to include as an insured the person or organization shown in the Schedule, but only with respect to liability arising out of "your work" for that insured by or for you.

POLICY NUMBER:

COMMERCIAL GENERAL LIABILITY

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

**ADDITIONAL INSURED – DESIGNATED PERSON OR
ORGANIZATION**

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART.

SCHEDULE

Name of Person or Organization:

(If no entry appears above, information required to complete this endorsement will be shown in the Declarations as applicable to this endorsement.)

WHO IS AN INSURED (Section II) is amended to include as an insured the person or organization shown in the Schedule as an insured but only with respect to liability arising out of your operations or premises owned by or rented to you.